

LOBBYING SUPPLEMENTAL REGISTRATION FORM

To be used for changes to registrations and terminations.

192

Lobbyist's Registration Number

Instructions

- Print in ink or type.
 - Complete form and return to Board of Ethics, 2415 Quail Dr., 3rd Floor, Baton Rouge LA 70808, (225) 763-8777 or (800) 842-6630. No fee is required.
 - This form must be submitted within 5 days of any changes in your registration form, to add employers or those you represent, or if you cease all activities requiring registration. It must be submitted within 10 days of any terminations of employment or representations.

1. NAME Clark Delano Mr.

2. BUSINESS PHONE: 225-275-7483

3. BUSINESS ADDRESS 10745 Waverland Dr. Boca Raton FL 33486
Street and No. City State Zip

MAILING ADDRESS 10745 WALTERSON A Mile Pt Pg Co 74835
Street and No. City State Zip

A. EMPLOYER Sets Expectations

5. EMPLOYER'S ADDRESS 10705 Silverland Rd. Brentwood Tn 37025
Suite and No. City State Zip

6. Have you ceased or terminated all lobbying activities requiring registration? Yes No

7. **LAWYER FEE PAYMENT** (a) Names of persons, groups, or organizations which you are adding or eliminating; (b) the address of each such person, group, or organization listed; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby; and (e) the date of termination if applicable.

1. Name GENE-CHART ASSOC.

Address 10745 Waverland Dr., Baton Rouge LA 70815

Business Etiquette | Public Relations - Page 10 of 10

New Representation
Does this person pay you?

What makes you mad?

If not, who plays you? _____

If No, who pays you? _____

If No, who pays you? _____

Terminated Representation as of 12-31-2002

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2. Name _____

Address _____

Business or purpose _____

New Representation

Does this person pay you? _____

If No, who pays you? _____

Terminated Representation as of _____

3. Name _____

Address _____

Business or purpose _____

New Representation

Does this person pay you? _____

If No, who pays you? _____

Terminated Representation as of _____

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; and that no information required by the Lobbyist Disclosure Act [LSA-R.S. 24:50 et seq.] has been deliberately omitted.


Signature of Lobbyist